are a simple and effective method of breast reconstruction, but they may not be suitable for all patients, particularly those who need or have had radiotherapy. Autologous methods in contrast are more surgically demanding, but they consistently yield better aesthetic results than non-autologous methods, particularly when combined with skin sparing mastectomy.

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Interactive case report

Postoperative hypoxia in a woman with Down's syndrome

This case was described on 9 and 16 April (*BMJ* 2005;330:834,888). Debate on the management of the patient continues on bmj.com (http://bmjjournals.com/cgi/eletters/330/7495/834). On 7 May we will publish the outcome of the case together with commentaries on the issues raised by the management and online discussion from the patient and relevant experts.

A memorable lesson

The magic word

It was my first day as a preregistration house officer at the Sunderland Royal Infirmary. The morning was a whirlwind of new experiences, clerking new admissions, taking blood samples, writing out request forms, and learning a host of new names and trying to remember who was who, as well as my way round the hospital.

Just after noon my bleeper went off, and I was summoned to the x ray department, where I was told the consultant radiologist wanted to see me. I entered his dimly lit office which had radiographs on the screens and a desk covered in reports. He passed me an x ray request form, which I recognised as the first such form that I had written out, earlier that morning.

"What's wrong with this form?" he asked. I looked at it carefully, checking name, date, patient registration number, and the various boxes—all seemed in order. Seeing my puzzled expression, he explained, "You forgot to write the word 'please' on the form. You have written next to 'Investigation required' 'Chest x ray.' You should have written 'Chest x ray, please.' Why should my staff perform the procedure for your patient if you don't write 'please' on the form? My radiographers have all been told to reject forms without a 'please' on the request."

I felt somewhat chastened, but I never forgot the lesson. Since that day, every request form I write out has a "please" on it, as do all my referral letters.

I later heard that he had had the same discussion with all the new housemen and registrars who had started that day. We had all been summoned, one by one, to be taught good manners. Even new consultants were not exempt.

I have passed this message on to the medical students I have taught over the years. The radiologist was right: saying "please" costs nothing and is a matter of good manners in communication between colleagues.

Joseph Spitzer *honorary senior clinical lecturer, Queen Mary, University of London (j.spitzer@doctors.org.uk)*